PTO/SB/17 (07-06)
Approved for use through 01/31/2007. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

OIPE MA	<i>\</i>
JAN 26 2007	
PARADRAMENTO	1

				Complete if Known						
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Number		09/478,812-Conf. #2204					
FEE TRANSMITTAL			Filing Date		January 7, 2000					
i i					asukiyasu Sugano					
For FY 2006			Examiner Name E. Lee							
Applicant claims small entity status. See 37 CFR 1.27			Art Unit 2815							
TOTAL AMOUNT OF PAYMENT (\$) 950.00			Attomey Docket	ON-1718						
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order Other (please identify):										
x Deposit Account Deposit Account Number: 18-0013 Deposit Account Name: Rader, Fishman & Grauer PLLC										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
X Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17										
FEE CALCULATION										
1. BASIC FILING, SEAR										
	FILIN	G FEES Small Entity	SE	ARCH FEES Small Entity	EXAMIN	ATION FEES				
Application Type	Fee (\$)	Fee (\$)	Fee (\$		Fee (\$)	Small Entity Fee (\$)	Fees Pa	nid (\$)		
Utility	300	150	500	250	200	100				
Design	200	100	100	50	130	65				
Plant	200	100	300	150	160	80				
Reissue	300	150	500	250	600	300				
Provisional	200	100	0	0	0	0				
2. EXCESS CLAIM FEES							_	mall Entity		
Fee Description Each claim over 20 (inclu	dina Daiamaa	•					Fee (\$)	Fee (\$)		
Each independent claim of							50 200	25		
Multiple dependent claim		ig reissues)					360	100 180		
•		ee (\$)	Fee F	aid (\$)	Mu	ltinle Denender		160		
- =	<u> </u>	=		<u> </u>		lultiple Dependent Claims ee (\$) Fee Paid (\$)				
HP = highest number of total c	laims paid for, if gr	eater than 20.								
Indep. Claims Extra	a Claims F	ee (\$)	Fee F	aid (\$)				~		
- =	×									
HP = highest number of indepe		for, if greater than	n 3.					-		
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
	Extra Sheets	Number o	of each a	dditional 50 or frac		Fee (\$)	Fee Pa	aid (\$)		
100 = /50 (round up to a whole number) x =										
Non-English Specification, \$130 face (no small entity discount)										
Other (e.g., late filing surcharge): 1252 Extension for response within second month 450.00 500.00										
SUBMITTED BY		=								
Signature	 	+-		Registration No.	24 104	Talasha	(202) 055	2750		
ng nature				(Attorney/Agent)	24,104	Telephone	(202) 955-	·3/5U		

Date

January 26, 2007

Ronald P

Kananen

Name (Print/Type)